

EXHIBIT Z



Re: North Shore Motor Leasing LLC - Trial Balance

From Wendy Kwun <wendy@islandautogroup.com>

Date Fri 9/30/2022 2:32 PM

To Thomas Jones <tjones@jonesandlittle.com>

Cc Gallagher, Frank <fgallagher@citrincooperman.com>; anthony deo <anthonyd@northshoremotors1.com>; Martz, Theresa <tmartz@citrincooperman.com>; Dan Osullivan <maddan959@aol.com>; Josh Aaronson <josh@islandautogroup.com>; Kera, Ellen <ekera@citrincooperman.com>

1 attachments (441 KB)

Northshore Motor 2020 Tax Return 2.pdf;

All,

Attached is a copy of the 2020 tax return sent from Richards, Witt & Charles to CitrinCooperman.

I'm not sure why the 2020 tax return was submitted twice by two different accounting firms.

Product: Partnership
Name: NORTHSHORE MOTOR LEASING LLC
FEIN: *****1757
Bank Info:
Fiscal Year Begin Date: 1/1/2020
IRS Message:

Category:
Plan Number:
Fiscal Year End Date: 12/31/2020

IRS Center: Ogden
e-Postmark: 9/13/2021 5:49 PM
Notification:
eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
09/13/2021	20P:13387_001:V1	Upload Started				
09/13/2021	20P:13387_001:V1	Released for Transmission - Validation in Progress			System	
09/13/2021	20P:13387_001:V1	Ready to transmit - Validation Complete				
09/13/2021	20P:13387_001:V1	Transmitted to FD	126817202125604b8c70			
09/13/2021	20P:13387_001:V1	Rejected by FD on 9/13/2021				
09/13/2021	20P:13387_001:V1	Rejected by Federal, State Not Submitted - NY				
09/13/2021	20P:13387_001:V1	Upload Started - Superseded Return				
09/13/2021	20P:13387_001:V1	Released for Transmission - Validation in Progress			System	
09/13/2021	20P:13387_001:V1	Ready to transmit - Validation Complete				
09/13/2021	20P:13387_001:V1	Transmitted to FD	126817202125604e1c30			
09/13/2021	20P:13387_001:V1	Transmitted to NY	1268172021256053dd19			
09/13/2021	20P:13387_001:V1	Accepted by FD on 9/13/2021				
09/14/2021	20P:13387_001:V1	Accepted by NY - on 9/14/2021				

ID	Status Date	Status	State/Other	State Category	FBAR	FBAR BSA ID
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Best Regards,

Wendy Kwun
Island Auto Group
wendy@islandautogroup.com
Office: 718-979-0934 X 146

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

Expanded Capital Account Summary

Name **NORTHSHORE MOTOR LEASING LLC** I.D. Number **** - ***1757**

Partner Number <u>1</u>	DAVID BARON 6 OLD WAGON LANE OLD WESTBURY, NY 11568	Partner's Identification Number *** - ** - 7839
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Beginning Capital <u><23,361.></u>	Capital Contributed	Schedule M-2, Lines 3, 4 & 7 <u>103,044.</u>	Withdrawals <u>40,000.</u>	Ending Capital <u>39,683.</u>
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Partner Number <u>2</u>	ASAD KHAN 16 ACORN PONDS DR ROSLYN, NY 11576	Partner's Identification Number *** - ** - 6499
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Beginning Capital <u><23,292.></u>	Capital Contributed	Schedule M-2, Lines 3, 4 & 7 <u>103,048.</u>	Withdrawals <u>35,000.</u>	Ending Capital <u>44,756.</u>
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Partner Number <u>3</u>	BRIAN CHABRIER 4 CREEK RIDGE RD BAYVILLE, NY 11709	Partner's Identification Number *** - ** - 3551
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Beginning Capital <u><25,741.></u>	Capital Contributed	Schedule M-2, Lines 3, 4 & 7 <u>103,044.</u>	Withdrawals <u>35,000.</u>	Ending Capital <u>42,303.</u>
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Partner Number		Partner's Identification Number
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Beginning Capital	Capital Contributed	Schedule M-2, Lines 3, 4 & 7	Withdrawals	Ending Capital
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Total For All Partner's Capital Accounts

Beginning Capital <u><72,394.></u>	Capital Contributed <u>0.</u>	Schedule M-2, Lines 3, 4 & 7 <u>309,136.</u>	Withdrawals <u>110,000.</u>	Ending Capital <u>126,742.</u>
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2020.06000 NORTHSORE MOTOR LEASING 178113 2

Form **7004**
(Rev. December 2018)
Department of the Treasury
Internal Revenue Service**Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form7004 for instructions and the latest information.****Print
or
Type**

Name

NORTHSHORE MOTOR LEASING LLC

Identifying number

****-***1757**

Number, street, and room or suite no. (If P.O. box, see instructions.)

180 MICHAEL DRIVE

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)

SYOSSET, NY 11791**Note:** File request for extension by the due date of the return. See instructions before completing this form.**Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns.** See instructions.**1** Enter the form code for the return listed below that this application is for **09**

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2** If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ☐
- 3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ☐
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ☐
- 5a** The application is for calendar year **2020**, or tax year beginning _____, and ending _____
- b Short tax year.** If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (See instructions - attach explanation.)

6 Tentative total tax	6	0.
7 Total payments and credits. See instructions	7	
8 Balance due. Subtract line 7 from line 6. See instructions	8	

LHA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **7004** (Rev. 12-2018)DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
KANSAS CITY, MO 64999-0019

EXTENSION GRANTED TO 09/14/21

Form **1065****U.S. Return of Partnership Income**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue ServiceFor calendar year 2020, or tax year beginning _____, ending _____
▶ Go to www.irs.gov/Form1065 for instructions and the latest information.**2020**

A Principal business activity SALES	Type or Print	Name of partnership NORTHSHORE MOTOR LEASING LLC	D Employer identification number **-***1757
B Principal product or service USED CARS		Number, street, and room or suite no. If a P.O. box, see instructions. 180 MICHAEL DRIVE	E Date business started 02/14/2018
C Business code number 441120		City or town, state or province, country, and ZIP or foreign postal code SYOSSET NY 11791	F Total assets \$ 5,425,488.

G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return

H Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) ▶

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ▶ **3**

J Check if Schedules C and M-3 are attached ▶ ☐

K Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Income	1 a Gross receipts or sales	1a	16,004,617.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a			1c 16,004,617.
	2 Cost of goods sold (attach Form 1125-A)			2 14,810,342.
	3 Gross profit. Subtract line 2 from line 1c			3 1,194,275.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6
7 Other income (loss) (attach statement)		SEE STATEMENT 1	7 1,446,096.	
8 Total income (loss). Combine lines 3 through 7			8 2,640,371.	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9 1,188,852.
	10 Guaranteed payments to partners			10
	11 Repairs and maintenance			11
	12 Bad debts			12
	13 Rent			13 299,129.
	14 Taxes and licenses		SEE STATEMENT 2	14 44,267.
	15 Interest (see instructions)			15 158,145.
	16 a Depreciation (if required, attach Form 4562)	16a		
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b		16c
	17 Depletion (Do not deduct oil and gas depletion.)			17
18 Retirement plans, etc.			18	
19 Employee benefit programs			19 41,835.	
20 Other deductions (attach statement)		SEE STATEMENT 3	20 804,330.	
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21 2,536,558.	
22 Ordinary business income (loss). Subtract line 21 from line 8			22 103,813.	
Tax and Payments	23 Interest due under the look-back method-completed long-term contracts (attach Form 8697)			23
	24 Interest due under the look-back method-income forecast method (attach Form 8866)			24
	25 BBA AAR imputed underpayment (see instructions)			25
	26 Other taxes (see instructions)			26
	27 Total balance due. Add lines 23 through 26			27
	28 Payment (see instructions)			28
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed			29
	30 Overpayment. If line 28 is larger than line 27, enter overpayment			30

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

▶ Signature of partner or limited liability company member ▶ Date

May the IRS discuss this return with the preparer shown below? See instr. ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶		09/13/21		P00024280
	Firm's address ▶			Firm's EIN ▶	** - ***8859
	RICHARDS, WITT & CHARLES, LLP				
	100 RING ROAD WEST				
	GARDEN CITY, NY 11530			Phone no.	516-741-0515

Form 1065 (2020)

NORTHSHORE MOTOR LEASING LLC

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Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:	Yes	No
a <input type="checkbox"/> Domestic general partnership		
b <input type="checkbox"/> Domestic limited partnership		
c <input checked="" type="checkbox"/> Domestic limited liability company		
d <input type="checkbox"/> Domestic limited liability partnership		
e <input type="checkbox"/> Foreign partnership		
f <input type="checkbox"/> Other ▶		

2 At the end of the tax year:	Yes	No
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X

3 At the end of the tax year, did the partnership:	Yes	No
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below	Yes	No
		X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

4 Does the partnership satisfy all four of the following conditions?	Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.		
b The partnership's total assets at the end of the tax year were less than \$ 1 million.		
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.		
d The partnership is not filing and is not required to file Schedule M-3 If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.		X

5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?	Yes	No
		X

6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?	Yes	No
		X

7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?	Yes	No
		X

8 At any time during calendar year 2020, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	Yes	No
		X

9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions	Yes	No
		X

10 a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.	Yes	No
		X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X

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NORTHSHORE MOTOR LEASING LLC

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Schedule B Other Information (continued)

	Yes	No
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year)		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16 a Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions	X	
b If "Yes," did you or will you file required Form(s) 1099?	X	
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return		
18 Enter the number of partners that are foreign governments under section 892		
19 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions		X
If "Yes," enter the total amount of the disallowed deductions		\$
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the partnership satisfy one or more of the following? See instructions		X
a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest.		
c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
25 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions	X	
If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3		3.
If "No," complete Designation of Partnership Representative below.		

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR ▶

U.S. address of PR ▶

U.S. phone
number of PR ▶

If the PR is an entity, name of the designated individual for the PR ▶

U.S. address of
designated
individual ▶U.S. phone
number of
designated
individual ▶

26 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 16		\$
27 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership		
28 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
29 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions.		
Percentage:	By Vote	By Value
		X

Form 1065 (2020)

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Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	103,813.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	4c	
	c Total. Add lines 4a and 4b	4c	
	5 Interest income	5	
	6 Dividends and dividend equivalents: a Ordinary dividends b Qualified dividends 6b c Dividend equivalents 6c	6a	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
Income (Loss)	9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b Collectibles (28%) gain (loss) 9b		
	c Unrecaptured section 1250 gain (attach statement) 9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type ▶	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	5,000.
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
d Other deductions (see instructions) Type ▶	13d		
Self-Employment	14a Net earnings (loss) from self-employment	14a	0.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a Name of country or U.S. possession ▶		
	b Gross income from all sources	16b	
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Reserved for future use ▶ e Foreign branch category ▶	16e	
	f Passive category ▶ g General category ▶ h Other ▶	16h	
	Deductions allocated and apportioned at partner level		
	i Interest expense ▶ j Other ▶	16j	
	Deductions allocated and apportioned at partnership level to foreign source income		
	k Reserved for future use ▶ l Foreign branch category ▶	16l	
	m Passive category ▶ n General category ▶ o Other ▶	16o	
	p Total foreign taxes (check one): Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16p	
q Reduction in taxes available for credit (attach statement)	16q		
r Other foreign tax information (attach statement)			
Alternative Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income SEE STATEMENT 4	18b	210,323.
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	110,000.
	b Distributions of other property	19b	
	20a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach statement) STMT 5			

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p						1	98,813.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners							
b Limited partners		98,813.					

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		393,049.		410,493.
2a Trade notes and accounts receivable	72,377.		81,248.	
b Less allowance for bad debts		72,377.		81,248.
3 Inventories		3,377,523.		4,867,099.
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)	STATEMENT 6	57,109.		66,648.
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach statement)				
9a Buildings and other depreciable assets			5,000.	
b Less accumulated depreciation			5,000.	
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach statement)				
14 Total assets		3,900,058.		5,425,488.
Liabilities and Capital				
15 Accounts payable		141,143.		509,963.
16 Mortgages, notes, bonds payable in less than 1 year		3,517,534.		4,433,999.
17 Other current liabilities (attach statement)	STATEMENT 7	223,525.		274,534.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more				
20 Other liabilities (attach statement)	STATEMENT 8	90,250.		80,250.
21 Partners' capital accounts		<72,394.>		126,742.
22 Total liabilities and capital		3,900,058.		5,425,488.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	309,136.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)		STMT 9	210,323.
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		7 Deductions included on Schedule K, lines 1 through 13d, and 16p, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$		8 Add lines 6 and 7	210,323.
5 Add lines 1 through 4	309,136.	9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	98,813.

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	<72,394.>	6 Distributions: a Cash	110,000.
2 Capital contributed: a Cash		b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) per books	309,136.	8 Add lines 6 and 7	110,000.
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	126,742.
5 Add lines 1 through 4	236,742.		

Form **1125-A**

Cost of Goods Sold

(Rev. November 2018)

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**

OMB No. 1545-0123

Department of the Treasury

▶ **Go to www.irs.gov/Form1125A for the latest information.**

Name

Employer identification number

NORTHSHORE MOTOR LEASING LLC

**** - ***1757**

1	Inventory at beginning of year	1	3,377,523.
2	Purchases	2	16,299,918.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	Total. Add lines 1 through 5	6	19,677,441.
7	Inventory at end of year	7	4,867,099.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	14,810,342.

9 a Check all methods used for valuing closing inventory:

- (i) ☒ Cost
- (ii) ☒ Lower of cost or market
- (iii) ☐ Other (Specify method used and attach explanation) ▶

b Check if there was a writedown of subnormal goods

▶ ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)

▶ ☐

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO

9d

e If property is produced or acquired for resale, do the rules of Section 263A apply to the entity? See instructions

☒ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory?

☐ Yes ☒ No

If "Yes," attach explanation.

For Paperwork Reduction Act Notice, see separate instructions.

Form 1125-A (Rev. 11-2018)

**SCHEDULE B-2
(Form 1065)**(December 2018)
Department of the Treasury
Internal Revenue Service**Election Out of the Centralized
Partnership Audit Regime**

OMB No. 1545-0123

▶ Attach to Form 1065 or Form 1066.

▶ Go to www.irs.gov/Form1065 for instructions and the latest information.

Name of Partnership

NORTHSHORE MOTOR LEASING LLC

Employer Identification Number (EIN)

-*1757

Certain partnerships with 100 or fewer partners can elect out of the centralized partnership audit regime if each partner is an individual, a C corporation, a foreign entity that would be treated as a C corporation were it domestic, an S corporation, or an estate of a deceased partner. For purposes of determining whether the partnership has 100 or fewer partners, the partnership must include all shareholders of any S corporation that is a partner. By completing Part I, you are making an affirmative statement that all of the partners in the partnership are eligible partners under section 6221(b)(1)(C) and you have provided all of the information on this schedule. See the instructions, including the instructions for the treatment of real estate mortgage investment conduits (REMICs), for more details.

Part I List of Eligible Partners

Use the following codes under Type of Eligible Partner:

I - Individual C - Corporation E - Estate of Deceased Partner F - Eligible Foreign Entity S - S corporation

Name of Partner	Taxpayer Identification Number (TIN)	Type of Eligible Partner (Code)
1 DAVID BARON	***-**-7839	I
2 ASAD KHAN	***-**-6499	I
3 BRIAN CHABRIER	***-**-3551	I
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

Continued on Part IV

Part II List of S Corporation Shareholders (For each S corporation partner, complete a separate Part II and separate Part V, if needed.)

Use the following codes under Type of Person:

I - Individual E - Estate of Deceased Shareholder T - Trust O - Other

Name of

S Corporation Partner ▶

TIN of Partner ▶

Name of Shareholder	Shareholder TIN	Type of Person (Code)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Continued on Part V

Part III Total Number of Schedules K-1 Required To Be Issued. See instructions.

1	Total of Part I and all Parts IV Schedules K-1 required to be issued by the partnership	1	3.
2	Total of Part II and all Parts V Schedules K-1 required to be issued by any S corporation partners	2	
3	Total. Add line 1 and line 2	3	3.

Note: If line 3 is more than 100, the partnership cannot make the election under section 6221(b).

Form 4562 Department of the Treasury Internal Revenue Service (99)	Depreciation and Amortization (Including Information on Listed Property) OTHER 1 ▶ Attach to your tax return. ▶ Go to www.irs.gov/Form4562 for instructions and the latest information.	OMB No. 1545-0172 2020 Attachment Sequence No. 179
Name(s) shown on return NORTHSHORE MOTOR LEASING LLC		Identifying number ** - ***1757

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	1,040,000.
2 Total cost of section 179 property placed in service (see instructions)	2	5,000.
3 Threshold cost of section 179 property before reduction in limitation	3	2,590,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	1,040,000.

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	
SCAN TABLET	5,000.	5,000.	

7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	5,000.
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	5,000.
10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	103,813.
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	5,000.
13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2020	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a Class life					S/L
b 12-year			12 yrs.		S/L
c 30-year	/		30 yrs.	MM	S/L
d 40-year	/		40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Form 4562 (2020)

NORTHSHORE MOTOR LEASING LLC

-*1757 Page 2

Part V**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)****24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their EmployeesAnswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2020 tax year:					
43 Amortization of costs that began before your 2020 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

2020 DEPRECIATION AND AMORTIZATION REPORT

[illegible]

FORM 1065	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
SERVICE CONTRACT INCOME		808,239.
FINANCE INCOME		582,663.
OTHER INCOME		55,193.
TOTAL TO FORM 1065, LINE 7		1,446,096.

FORM 1065	TAX EXPENSE	STATEMENT 2
DESCRIPTION		AMOUNT
PAYROLL TAXES		41,126.
TAXES, OTHER		3,140.
TOTAL TO FORM 1065, LINE 14		44,267.

FORM 1065	OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION		AMOUNT
POLICY WORK		127,201.
UTILITIES		21,622.
TELEPHONE		20,956.
OFFICE SUPPLIES		28,448.
OUTSIDE SERVICES		<267,020.>
CREDIT CARD PROCESSING FEES		10,214.
PROFESSIONAL FEES		21,981.
MANAGEMENT FEES		308,387.
DATA PROCESSING		145,637.
MISCELLANEOUS EXPENSE		9,585.
EQUIPMENT RENTAL AND REPAIRS		1,861.
INSURANCE		30,035.
COMPANY VEHICLE EXPENSE		3,739.
SHOP SUPPLIES		2,046.
LLC FEE		3,000.
ADVERTISING		336,638.
TOTAL TO FORM 1065, LINE 20		804,330.

SCHEDULE K	OTHER TAX-EXEMPT INCOME	STATEMENT 4
DESCRIPTION		AMOUNT
EIDL GRANT PROCEEDS		10,000.
PPP LOAN PROCEEDS FORGIVEN		200,323.
TOTAL TO SCHEDULE K, LINE 18B		210,323.

SCHEDULE K	OTHER ITEMS	STATEMENT 5
DESCRIPTION		AMOUNT
GROSS RECEIPTS FOR SECTION 448(C)		16,004,617.
SECTION 199A - ORDINARY INCOME (LOSS)		103,813.
SECTION 199A - SECTION 179 DEDUCTION		5,000.
SECTION 199A W-2 WAGES		1,188,852.
SECTION 199A UNADJUSTED BASIS OF ASSETS		5,000.
BUSINESS INTEREST EXPENSE		158,145.

SCHEDULE L	OTHER CURRENT ASSETS	STATEMENT 6
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
FINANCE RESERVES RECEIVABLE	57,109.	66,648.
TOTAL TO SCHEDULE L, LINE 6	57,109.	66,648.

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT 7
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
SALES TAX PAYABLE	103,035.	130,306.
CUSTOMER DEPOSITS	93,522.	141,228.
ACCRUED EXPENSES	23,968.	0.
ACCRUED LLC FEE	3,000.	3,000.
TOTAL TO SCHEDULE L, LINE 17	223,525.	274,534.

SCHEDULE L	OTHER LIABILITIES	STATEMENT 8
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
OTHER LOANS PAYABLE	90,250.	80,250.
TOTAL TO SCHEDULE L, LINE 20	90,250.	80,250.

SCHEDULE M-1	INCOME RECORDED ON BOOKS NOT INCLUDED ON RETURN	STATEMENT 9
DESCRIPTION		AMOUNT
EIDL GRANT PROCEEDS		10,000.
PPP LOAN PROCEEDS FORGIVEN		200,323.
TOTAL TO SCHEDULE M-1, LINE 6		210,323.

651119

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2020**

For calendar year 2020, or tax year

beginning

ending

Partner's Share of Income, Deductions, Credits, etc.

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

-*1757

B Partnership's name, address, city, state, and ZIP codeNORTHSHORE MOTOR LEASING LLC
180 MICHAEL DRIVE
SYOSSET, NY 11791**C** IRS Center where partnership filed return ▶

E-FILE

D ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

***-**-7839

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.DAVID BARON
6 OLD WAGON LANE
OLD WESTBURY, NY 11568**G** ☐ General partner or LLC member-manager☒ Limited partner or other LLC member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **INDIVIDUAL****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	33.3333334 %	33.3333334 %
Loss	33.3333334 %	33.3333334 %
Capital	33.3333334 %	33.3333334 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 1,172,511.	\$ 1,478,000.

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis****SEE STATEMENT**

Beginning capital account	\$	<23,361.>
Capital contributed during the year	\$	
Current year net income (loss)	\$	103,044.
Other increase (decrease) (attach explanation)	\$	
Withdrawals & distributions	\$	(40,000.)
Ending capital account	\$	39,683.

M Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$	
Ending	\$	

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1 Ordinary business income (loss)	15 Credits
34,604.	
2 Net rental real estate income (loss)	16 Foreign transactions
3 Other net rental income (loss)	
4a Guaranteed payments for services	
4b Guaranteed payments for capital	
4c Total guaranteed payments	
5 Interest income	17 Alternative min tax (AMT) items
6a Ordinary dividends	18 Tax-exempt income and nondeductible expenses
	B* STMT
6b Qualified dividends	
6c Dividend equivalents	
7 Royalties	19 Distributions
	A 40,000.
8 Net short-term capital gain (loss)	20 Other information
	N * 52,715.
9a Net long-term capital gain (loss)	Z * STMT
	AG * 5,334,872.
9b Collectibles (28%) gain (loss)	
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	
1,667.	
13 Other deductions	
14 Self-employment earnings (loss)	
A 0.	
21 <input type="checkbox"/> More than one activity for at-risk purposes*	
22 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 OTHER TAX-EXEMPT INCOME, BOX 18, CODE B

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EIDL GRANT PROCEEDS		3,333.
PPP LOAN PROCEEDS FORGIVEN		66,774.
TOTAL TO SCHEDULE K-1, BOX 18, CODE B		70,107.

SCHEDULE K-1 BUSINESS INTEREST EXPENSE, BOX 20, CODE N

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
BUSINESS INTEREST EXPENSE (INCLUDED IN ORDINARY BUSINESS INCOME (LOSS))	SEE PARTNERS INSTRUCTIONS	52,715.
TOTAL TO SCHEDULE K-1, BOX 20, CODE N		52,715.

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	34,604.
SECTION 179 DEDUCTION	1,667.
W-2 WAGES	396,280.
UNADJUSTED BASIS OF ASSETS	1,667.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 20, CODE AG

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
GROSS RECEIPTS - CURRENT YEAR	SEE IRS SCH. K-1 INSTRUCTIONS	5,334,872.
TOTAL TO SCHEDULE K-1, LINE 20 AG		5,334,872.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	34,604.	
OTHER TAX-EXEMPT INCOME	70,107.	
SCHEDULE K-1 INCOME SUBTOTAL		104,711.
SECTION 179 EXPENSE	-1,667.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-1,667.
NET INCOME (LOSS) PER SCHEDULE K-1		103,044.

SCHEDULE K-1 ITEM L. PARTNER'S CAPITAL ACCOUNT ANALYSIS

BEGINNING CAPITAL ACCOUNT METHOD USED - TAX BASIS

SCHEDULE K-1 ELECTION UNDER SECTION 1101(G)(4) OF BBA

NORTHSHORE MOTOR LEASING LLC HAS MADE THE ELECTION OUT OF THE CENTRALIZED PARTNERSHIP AUDIT REGIME UNDER SECTION 6221(B) FOR THE YEAR ENDING DECEMBER 31, 2020.

651119

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2020**

For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

-*1757

B Partnership's name, address, city, state, and ZIP codeNORTHSHORE MOTOR LEASING LLC
180 MICHAEL DRIVE
SYOSSET, NY 11791**C** IRS Center where partnership filed return ▶

E-FILE

D ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

--6499

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

ASAD KHAN

16 ACORN PONDS DR
ROSLYN, NY 11576**G** ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **INDIVIDUAL****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	33.3333333 %	33.3333333 %
Loss	33.3333333 %	33.3333333 %
Capital	33.3333333 %	33.3333333 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 1,172,512.	\$ 1,477,999.

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis****SEE STATEMENT**

Beginning capital account	\$	<23,292.>
Capital contributed during the year	\$	
Current year net income (loss)	\$	103,048.
Other increase (decrease) (attach explanation)	\$	
Withdrawals & distributions	\$	(35,000.)
Ending capital account	\$	44,756.

M Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$	
Ending	\$	

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1 Ordinary business income (loss)	15 Credits
34,605.	
2 Net rental real estate income (loss)	16 Foreign transactions
3 Other net rental income (loss)	
4a Guaranteed payments for services	
4b Guaranteed payments for capital	
4c Total guaranteed payments	
5 Interest income	17 Alternative min tax (AMT) items
6a Ordinary dividends	18 Tax-exempt income and nondeductible expenses
	B* STMT
6b Qualified dividends	
6c Dividend equivalents	
7 Royalties	19 Distributions
	A 35,000.
8 Net short-term capital gain (loss)	20 Other information
	N* 52,715.
9a Net long-term capital gain (loss)	Z* STMT
9b Collectibles (28%) gain (loss)	AG* 5,334,873.
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	
1,666.	
13 Other deductions	
14 Self-employment earnings (loss)	
A 0.	
21 <input type="checkbox"/> More than one activity for at-risk purposes*	
22 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 OTHER TAX-EXEMPT INCOME, BOX 18, CODE B

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EIDL GRANT PROCEEDS		3,334.
PPP LOAN PROCEEDS FORGIVEN		66,775.
TOTAL TO SCHEDULE K-1, BOX 18, CODE B		70,109.

SCHEDULE K-1 BUSINESS INTEREST EXPENSE, BOX 20, CODE N

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
BUSINESS INTEREST EXPENSE (INCLUDED IN ORDINARY BUSINESS INCOME (LOSS))	SEE PARTNERS INSTRUCTIONS	52,715.
TOTAL TO SCHEDULE K-1, BOX 20, CODE N		52,715.

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	34,605.
SECTION 179 DEDUCTION	1,666.
W-2 WAGES	396,292.
UNADJUSTED BASIS OF ASSETS	1,666.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 20, CODE AG

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
GROSS RECEIPTS - CURRENT YEAR	SEE IRS SCH. K-1 INSTRUCTIONS	5,334,873.
TOTAL TO SCHEDULE K-1, LINE 20 AG		5,334,873.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	34,605.	
OTHER TAX-EXEMPT INCOME	70,109.	
SCHEDULE K-1 INCOME SUBTOTAL		104,714.
SECTION 179 EXPENSE	-1,666.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-1,666.
NET INCOME (LOSS) PER SCHEDULE K-1		103,048.

SCHEDULE K-1 ITEM L. PARTNER'S CAPITAL ACCOUNT ANALYSIS

BEGINNING CAPITAL ACCOUNT METHOD USED - TAX BASIS

SCHEDULE K-1 ELECTION UNDER SECTION 1101(G)(4) OF BBA

NORTHSHORE MOTOR LEASING LLC HAS MADE THE ELECTION OUT OF THE CENTRALIZED
PARTNERSHIP AUDIT REGIME UNDER SECTION 6221(B) FOR THE YEAR ENDING DECEMBER 31,
2020.

651119

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2020**

For calendar year 2020, or tax year

beginning

ending

Partner's Share of Income, Deductions, Credits, etc.

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

-*1757

B Partnership's name, address, city, state, and ZIP codeNORTHSHORE MOTOR LEASING LLC
180 MICHAEL DRIVE
SYOSSET, NY 11791**C** IRS Center where partnership filed return ▶

E-FILE

D ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

--3551

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

BRIAN CHABRIER

4 CREEK RIDGE RD

BAYVILLE, NY 11709

G ☐ General partner or LLC member-manager☒ Limited partner or other LLC member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **INDIVIDUAL****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	33.3333333 %	33.3333333 %
Loss	33.3333333 %	33.3333333 %
Capital	33.3333333 %	33.3333333 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 1,172,511.	\$ 1,478,000.

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis****SEE STATEMENT**

Beginning capital account	\$	<25,741.>
Capital contributed during the year	\$	
Current year net income (loss)	\$	103,044.
Other increase (decrease) (attach explanation)	\$	
Withdrawals & distributions	\$	(35,000.)
Ending capital account	\$	42,303.

M Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$	
Ending	\$	

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1 Ordinary business income (loss)	15 Credits
34,604.	
2 Net rental real estate income (loss)	16 Foreign transactions
3 Other net rental income (loss)	
4a Guaranteed payments for services	
4b Guaranteed payments for capital	
4c Total guaranteed payments	
5 Interest income	17 Alternative min tax (AMT) items
6a Ordinary dividends	18 Tax-exempt income and nondeductible expenses
6b Qualified dividends	B* STMT
6c Dividend equivalents	
7 Royalties	19 Distributions
	A 35,000.
8 Net short-term capital gain (loss)	20 Other information
9a Net long-term capital gain (loss)	N * 52,715.
	Z * STMT
9b Collectibles (28%) gain (loss)	AG * 5,334,872.
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	
1,667.	
13 Other deductions	
14 Self-employment earnings (loss)	
A 0.	
21 <input type="checkbox"/> More than one activity for at-risk purposes*	
22 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 OTHER TAX-EXEMPT INCOME, BOX 18, CODE B

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EIDL GRANT PROCEEDS		3,333.
PPP LOAN PROCEEDS FORGIVEN		66,774.
TOTAL TO SCHEDULE K-1, BOX 18, CODE B		70,107.

SCHEDULE K-1 BUSINESS INTEREST EXPENSE, BOX 20, CODE N

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
BUSINESS INTEREST EXPENSE (INCLUDED IN ORDINARY BUSINESS INCOME (LOSS))	SEE PARTNERS INSTRUCTIONS	52,715.
TOTAL TO SCHEDULE K-1, BOX 20, CODE N		52,715.

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	34,604.
SECTION 179 DEDUCTION	1,667.
W-2 WAGES	396,280.
UNADJUSTED BASIS OF ASSETS	1,667.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 20, CODE AG

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
GROSS RECEIPTS - CURRENT YEAR	SEE IRS SCH. K-1 INSTRUCTIONS	5,334,872.
TOTAL TO SCHEDULE K-1, LINE 20 AG		5,334,872.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	34,604.	
OTHER TAX-EXEMPT INCOME	70,107.	
SCHEDULE K-1 INCOME SUBTOTAL		104,711.
SECTION 179 EXPENSE	-1,667.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-1,667.
NET INCOME (LOSS) PER SCHEDULE K-1		103,044.

SCHEDULE K-1 ITEM L. PARTNER'S CAPITAL ACCOUNT ANALYSIS

BEGINNING CAPITAL ACCOUNT METHOD USED - TAX BASIS

SCHEDULE K-1 ELECTION UNDER SECTION 1101(G)(4) OF BBA

NORTHSHORE MOTOR LEASING LLC HAS MADE THE ELECTION OUT OF THE CENTRALIZED
PARTNERSHIP AUDIT REGIME UNDER SECTION 6221(B) FOR THE YEAR ENDING DECEMBER 31,
2020.



Department of Taxation and Finance

088375 12-31-20

New York State E-File Signature Authorization for Tax Year 2020 for Forms IT-204 and IT-204-LL

Electronic return originator (ERO): Do not mail this form to the Tax Department. Keep it for your records.

Partnership name:

NORTHSHORE MOTOR LEASING LLC

Return type (mark an X to indicate which form you are e-filing):

☒ IT-204☐ IT-204-LL

Purpose

Form TR-579-PT must be completed to authorize an ERO to e-file Form IT-204, *Partnership Return*, or Form IT-204-LL, *Partnership, Limited Liability Company, and Limited Liability Partnership Filing Fee Payment Form*. For the purposes of this form, all three forms of business entities will be referred to hereinafter as a *partnership*.

EROs must complete Part B prior to transmitting an electronically filed Form IT-204 or IT-204-LL.

Both the paid preparer and the ERO are required to sign Part B. However, if an individual performs as both the paid preparer and the ERO, he or she is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Note that an alternative signature can be used as described in Publication 58, *Information for Income Tax Return Preparers*, available on our website.

General instructions

Part A must be completed by an authorized member or general partner before the ERO transmits the electronically filed Form IT-204 or IT-204-LL. Note that an electronic signature can be used as described in TSB-M-20(1)C, (2)I, *E-File Authorizations (TR-579 forms) for Taxpayers Using a Paid Preparer for Electronically Filed Tax Returns*.

This form is not required for electronically filed Form IT-370 -PF, *Application for Automatic Extension of Time to File for Partnerships and Fiduciaries*.

Financial institution information for Form IT-204-LL filers (must be completed if electronic payment is authorized)

- 1 Amount owed on return **1.**
- 2 Financial institution routing number **2.**
- 3 Financial institution account number **3.**
- 4 Account type: ☐ Personal checking ☐ Personal savings ☐ Business checking ☐ Business savings

Part A - Declaration of authorized member or general partner and authorizations for Form IT-204 or IT-204-LL

Under penalty of perjury, I declare that I have examined the information on this 2020 New York State electronic partnership return, including any accompanying schedules, attachments, and statements, and certify that this electronic return is true, correct, and complete. The ERO has my consent to send this 2020 New York State electronic partnership return to New York State through the Internal Revenue Service (IRS). I understand that by executing this Form TR-579-PT, I am authorizing the ERO to sign and file this return on behalf of the partnership and agree that the ERO's submission of the partnership's return to the IRS, together with this authorization, will serve as the electronic signature for the return and

any authorized payment transaction. If I am paying my New York State partnership fees due by electronic funds withdrawal, I certify that the account holder has authorized the New York State Tax Department and its designated financial agents to initiate an electronic funds withdrawal from the financial institution account indicated on this 2020 electronic return, and authorized the financial institution to withdraw the amount from that account. As New York does not support International ACH Transactions (IAT), I attest the source for these funds is within the United States. I understand and agree that I may revoke this authorization for payment only by contacting the Tax Department no later than two (2) business days prior to the payment date.

Signature of authorized member or general partner		Date
Print your name BRIAN CHABRIER	Title MEMBER	

Part B - Declaration of ERO and paid preparer

Under penalty of perjury, I declare that the information contained in this 2020 New York State electronic partnership return is the information furnished to me by the partnership. If the partnership furnished me a completed paper 2020 New York State partnership return signed by a paid preparer, I declare that the information contained in the partnership's

2020 New York State electronic partnership tax return is identical to that contained in the paper return. If I am the paid preparer, under penalty of perjury I declare that I have examined this 2020 New York State electronic partnership tax return, and, to the best of my knowledge and belief, the return is true, correct, and complete. I have based this declaration on all information available to me.

Do not mail Form TR-579-PT to the Tax Department:

EROs must keep this form for three years and present it to the Tax Department upon request.

ERO's signature	Print name PAUL L CHARLES, CPA	Date 09-13-21
Paid preparer's signature PAUL L. CHARLES, CPA	Print name	Date 09-13-21

www.tax.ny.gov

TR-579-PT (12/20)

1019



Department of Taxation and Finance

Application for Automatic Extension of Time to File for Partnerships and Fiduciaries (with instructions)

068551 09-21-20

IT-370-PF

Instructions

General information

Purpose - File Form IT-370-PF on or before the due date of the return to get an automatic extension of time to file Form IT-204, *Partnership Return*, or IT-205, *Fiduciary Income Tax Return*. Form IT-370-PF automatically extends the due date for filing as follows:

- Form IT-204 - **six months**
- Form IT-205 - **five and one-half months**

Note: We no longer accept a copy of the federal extension form in place of Form IT-370-PF.

If you have to file Form Y-206, *Yonkers Nonresident Fiduciary Earnings Tax Return*, the time to file is automatically extended when you file Form IT-370-PF. For more information on who is required to file Form Y-206, see the instructions for the form.

You may file Form IT-204 or Form IT-205 any time before the extension period ends. An extension of time to file Form IT-204 or IT-205 will not extend the time for filing New York State income tax returns of partners of a partnership or the beneficiaries of an estate or trust.

When to file - File a completed Form IT-370-PF on or before the filing deadline for the return (extension applications filed after the filing deadline for the return are invalid). Generally, the filing deadline is:

- **Partnerships** - the fifteenth day of the third month following the close of your tax year (for calendar-year filers, March 15, 2021).
- **Estates and trusts** - the fifteenth day of the fourth month following the close of your tax year (for calendar-year filers, April 15, 2021).

However, you may file Form IT-370-PF on or before June 15, 2021, if you are a **nonresident alien estate or trust** and you qualify to file your federal and New York State income tax returns on June 15, 2021. See *Special condition codes* on page 2.

How to file - Complete a separate Form IT-370-PF for each partnership (including limited liability companies (LLCs), limited liability investment companies (LLICs), and limited liability trust companies (LLTCs) treated as partnerships), each limited liability partnership, and each estate or trust for which you are requesting an extension of time to file. Form IT-205 filers - Form IT-370-PF must be filed with payment for any tax owed on or before the due date of the return (see the worksheet instructions on page 2).

Penalties

Estates and trusts late payment penalty - If an estate or trust does not pay the income tax liability when due (determined with regard to any valid extension of time to pay), it will have to pay a penalty of 1/2 of 1% of the unpaid amount for each month or part of a month it is not paid, up to a maximum of 25%. The penalty will not be charged if reasonable cause for

paying late can be shown. This penalty is in addition to the interest charged for late payments.

Reasonable cause will be presumed with respect to the addition to tax for late payment of income tax if the requirements relating to extensions of time to file have been complied with, the balance due shown on the income tax return, reduced by any sales or use tax that is owed, is no greater than 10% of the total New York State, New York City, and Yonkers tax shown on the income tax return, and the balance due shown on the income tax return is paid with the return.

Estates and trusts late filing penalty - If you do not file Form IT-205 when due (determined with regard to any extension of time to file), or if you do not file Form IT-370-PF on time and obtain an extension of time to file, you will have to pay a penalty of 5% of the income tax due for each month, or part of a month, the return is late up to a maximum of 25%.

However, if the return is not filed within 60 days of the time prescribed for filing a return (including extensions), this penalty will not be less than the lesser of \$100 or 100% of the amount required to be shown as income tax due on the return reduced by any income tax paid and by any credit that may be claimed. The penalty will not be charged if reasonable cause for filing late is shown.

Partnerships - A partnership that is required to file Form IT-204 and: (1) fails to file that return on time, including any extension of time, or (2) files a return that is incomplete and fails to show the information required under section 658(c), will have to pay a penalty. The penalty will be imposed for each month or part of a month, up to a maximum of 5 months, that the failure continues. The amount of the penalty for each month will be calculated by multiplying \$50 by the total number of partners in the partnership during any part of the partnership's tax year who were also subject to New York personal income tax during any part of the tax year. The penalty will not be charged if reasonable cause for filing late is shown.

Interest - Interest will be charged on any income tax or sales or use tax that is not paid on or before the due date of your return, even if you received an extension of time to file your return. Interest is a charge for the use of money and in most cases may not be waived. Interest is compounded daily and the rate is adjusted quarterly.

Fee for payments returned by banks - The law allows the Tax Department to charge a \$50 fee when a check, money order, or electronic payment is returned by a bank for nonpayment. However, if an electronic payment is returned as a result of an error by the bank or the department, the department won't charge the fee. If your payment is returned, we will send a separate bill for \$50 for each return or other tax document associated with the returned payment.

▼ Detach (cut) here ▼ Do not submit with your return.



Department of Taxation and Finance

Application for Automatic Extension of Time to File for Partnerships and Fiduciaries

Mark an **X** in one box for the form you will be filing:

IT-370-PF

Form IT-204 ☒Form IT-205 ☐Paid preparer? Mark an **X** in the box and complete page 2 ☒

Partnership, estate or trust ID number (EIN) *****1757	Date fiscal year begins	Date fiscal year ends
Name of partnership, estate, or trust NORTHSHORE MOTOR LEASING LLC		
Name and title of fiduciary		
Mailing address (number and street or PO box) of partnership or fiduciary 180 MICHAEL DRIVE		Apartment number
City, village, or post office (see instructions) SYOSSET	State NY	ZIP code 11791
Email:		

Enter your 2-character special condition code

if applicable (see instructions)

Mark an **X** in the box for each tax that the estate or trust is subject to:New York State tax ☐ New York City tax ☐ Yonkers tax ☐

1 Sales and use tax Dollars Cents **00**

2 Total payment Dollars Cents **00**

3711201019 *****1757 1



IT-370-PF (2020) (Page 2 of 2)

068552 09-21-20

Instructions (continued)

Privacy notification

See our website or Publication 54, *Privacy Notification*.

Specific instructions

Filling in your form - Please use black ink (and never use red ink) when making entries on this form.**Name and address box - Partnerships** must enter the employer identification number (EIN), name, and address of the partnership. **Estates and trusts** must enter the estate's or trust's EIN and the name of the estate or trust **exactly** as shown on federal Form SS-4. Also enter the address of the fiduciary or firm in the spaces provided.To ensure that any payment made with this extension is properly credited, this information must agree with the information on the return you are filing. Failure to provide an identification number may invalidate this extension. If the entity does not have an EIN but has applied for one, enter *applied for*.**Foreign addresses** - Enter the information in the following order: city, province or state, and then country (all in the *City, village, or post office* box). Follow the country's practice for entering the postal code. **Do not abbreviate the country name.**

If the entity files on a fiscal year basis, enter the beginning and ending dates of the fiscal year in the appropriate boxes.

Special condition codes - If you are a nonresident alien estate or trust and your filing due date is June 15, 2021, **and** you need an additional five and one-half months to file (November 30, 2021), enter special condition code **E4**. Also enter special condition code **E4** on Form IT-205.

Worksheet instructions

Form IT-205 filers only - Complete the following worksheet to determine if the estate or trust must make a payment with Form IT-370-PF.If you enter an amount on lines 1, 2, or 3 of this worksheet, mark an **X** in the appropriate box on page 1 of this form.**Line 1** - Enter the amount of your New York State income tax liability for 2020 that you expect to enter on Form IT-205, line 14.**Line 2** - Enter the amount of your New York City income tax liability for 2020 that you expect to enter on Form IT-205, line 23.**Line 3** - Enter the amount of your Yonkers income tax liability for 2020 that you expect to enter on Form IT-205, lines 25 through 27.**Line 4** - Enter the amount of sales or use tax, if any, that you will be required to report when you file your 2020 return. See the instructions for your NYS fiduciary income tax return for information on how to compute your sales and use tax. Also enter this amount on line 1 on page 1 of this form.**Line 6** - Enter the amount of 2020 income tax already paid that you expect to enter on Form IT-205, line 37 (excluding the amount paid with Form IT-370-PF).

Worksheet	
1	New York State income tax liability for 2020
2	New York City income tax liability for 2020
3	Yonkers income tax liability for 2020
4	Sales and use tax due for 2020 (enter this amount here and on line 1 on page 1)
5	Total taxes (add lines 1 through 4)
6	Total 2020 income tax already paid
7	Total payment (subtract line 6 from line 5 and enter this amount here and on line 2 on page 1). If line 6 is more than line 5, enter 0

Note: You may be subject to penalties if you underestimate the balance due.**How to claim credit for payment made with this form**

Include the amount paid with Form IT-370-PF on Form IT-205, line 30. For more information, see the line instructions for Form IT-205.

Where to file**If you are enclosing a payment** with this extension request, mail Form IT-370-PF with your payment to:

EXTENSION REQUEST
PO BOX 4125
BINGHAMTON NY 13902-4125

If not enclosing a payment with this extension request, mail Form IT-370-PF to:

EXTENSION REQUEST - NR
PO BOX 4126
BINGHAMTON NY 13902-4126

For information about private delivery services, see Publication 55, *Designated Private Delivery Services*.**Need help?****www**Visit our website at www.tax.ny.gov

- get information and manage your taxes online
- check for new online services and features

Telephone assistance

Automated income tax refund status: 518-457-5149
 Personal Income Tax Information Center: 518-457-5181
 To order forms and publications: 518-457-5431
 Text Telephone (TTY) or TDD: Dial 7-1-1 for the New York Relay Service
 equipment users

▼ Detach (cut) here ▼ Do not submit with your return.

IT-370-PF (2020) (Page 2 of 2)

Payment options - An estate or trust must make full payment of any balance due with this automatic extension of time to file. Pay by check or money order made payable in U.S. funds to *New York State Income Tax* and write the estate's or trust's EIN and *2020 Income Tax* on it.**Paid preparers** - Under the law, all paid preparers must sign and complete the paid preparer section of the form. Paid preparers may be subject to civil and/or criminal sanctions if they fail to complete this section in full.

▼ Paid preparer must complete (see instructions) ▼		Date: 09132021
Preparer's signature ▶ PAUL L. CHARLES, CPA	▶ Preparer's NYTPRIN	
Firm's name (or yours, if self-employed) RICHARDS, WITT & CHARLES, L	▼ Preparer's PTIN or SSN *****	
Address 100 RING ROAD WEST GARDEN CITY, NY 11530	● Employer identification number *****8859	
Email: PCHARLES@AUTOCPA.NET	NYTPRIN excl. code 03	

When completing this section, enter your New York tax preparer registration identification number (NYTPRIN) if you are required to have one. If you are not required to have a NYTPRIN, enter in the *NYTPRIN excl. code* box one of the specified 2-digit codes listed below that indicates why you are exempt from the registration requirement. You **must** enter a NYTPRIN or an exclusion code. Also, you must enter your federal preparer tax identification number (PTIN) if you have one; if not, you must enter your Social Security number.

Code	Exemption type	Code	Exemption type
01	Attorney	02	Employee of attorney
03	CPA	04	Employee of CPA
05	PA (Public Accountant)	06	Employee of PA
07	Enrolled agent	08	Employee of enrolled agent
09	Volunteer tax preparer	10	Employee of business preparing that business' return

See our website for more information about the tax preparer registration requirements.

3712201019 *****1757 1





Department of Taxation and Finance
Partnership Return

068501 11-20-20

IT-204

See the instructions, Form IT-204-I.

For calendar year 2020
or tax year beginningand
ending

Legal name NORTHSHORE MOTOR LEASING LLC			Employer identification number (EIN) *****1757	
Trade name of business if different from legal name above			NYS principal business activity SALES	
Address (number and street or rural route) 180 MICHAEL DRIVE		City, village, or post office SYOSSET		NAICS business code number (from NYS Pub 910) 441120
State NY	ZIP code 11791	Country	Principal product or service USED CARS	Date business started 02142018
Section 1 - Partnership information			Special conditions for filing your 2020 tax return (see instr)	

A Mark an X in the box that applies to your entity

- ☐ Regular partnership
 ☐ Limited liability partnership (LLP)
 ☐ Portfolio investment partnership (see instr.)
 ☐ Other
 ☒ Limited liability company (LLC - including limited liability investment company and a limited liability trust company)

B 1) Did the partnership have any income, gain, loss, or deduction derived from NY sources during the tax year?B1 Yes ☒ No ☐

2) If No, enter the number of resident partners

B2 **C** Mark applicable box(es) ☐ Change of address ☐ Initial return ☐ Amended return ☐ Final return (submit explanation)**D** 1) Is this return the result of federal audit changes?D1 Yes ☐ No ☒

If Yes: 2) Enter date of final federal determination

D2

3) Do you concede the federal audit changes?

D3 Yes ☐ No ☐**E** Did you file a NYS partnership return for: 1) 2018?E1 Yes ☐ No ☒

2) 2019?

E2 Yes ☒ No ☐If No, state reason: **F** Number of partners

1) Article 22

F1

2) Article 9-A

F2

3) Other

F3

4) Total

F4 **G** Does the partnership currently have tax accounts with NYS for the following taxes?

1) Sales and use tax

Yes ☒ No ☐

(if Yes, enter ID number) ...

G1

2) Withholding tax

Yes ☒ No ☐

(if Yes, enter ID number) ...

G2

H Did the partnership have an interest in real property located in NYS during the last three years?H Yes ☐ No ☒**I** Has there been a transfer or acquisition of a controlling interest in this entity during the last three years?I Yes ☐ No ☒**J** Did the partnership engage in a like-kind transaction under IRC 1031 during the tax year?J Yes ☐ No ☒

Third-party designee? (see instr.) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Print designee's name PAUL L. CHARLES, CPA	Designee's phone number 516-741-0515	Personal identification number (PIN) 11530
	Email: PCHARLES@AUTOCPA.NET		
▼ Paid preparer must complete (see instr.) ▼		▼ Sign here ▼	
Preparer's signature PAUL L. CHARLES, CPA		Signature of general partner	
Firm's name (or yours, if self-employed) RICHARDS, WITT & CHARLES, L		Date	
Address 100 RING ROAD WEST GARDEN CITY NY 11530		Daytime phone number	
Preparer's PTIN or SSN *****		Email:	
Employer identification number *****8859			
NYTPRIN excl. code 03			
Email: PCHARLES@AUTOCPA.NET			

Mail your return to: STATE PROCESSING CENTER, PO BOX 15198, ALBANY NY 12212-5198.

204001201019



NO HANDWRITTEN ENTRIES, OTHER THAN SIGNATURE, ON THIS FORM

Section 1 - Partnership information (continued)

K	Did the partnership sell property during the tax year that had a deferred gain from a previous IRC 1031 or IRC 1033 transaction?	K	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
L	Was there a distribution of property or a transfer of a partnership interest during the tax year?	L	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
M	Does the partnership have a valid IRC section 754 election in place for this reporting period?	M	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
N	Is this partnership under audit by the IRS or has it been audited in a prior year?	N	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
O	Is the partnership required to file Form DTF-686 or DTF-686-ATT for this filing period, to report a reportable transaction, New York reportable transaction, listed transaction or registered tax shelter?	O	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If Yes, complete and submit Form(s) DTF-686, DTF-686-ATT, and any applicable federal forms.						
P	Did the partnership make purchases subject to sales and compensating use tax for which NYS tax was not paid? (see instructions)	P	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Q	Did the partnership have a financial account located in a foreign country? (see instructions)	Q	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
R	Was the partnership required to report any nonqualified deferred compensation, as required by IRC § 457A, on its 2020 federal return? (see instructions)	R	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Section 2 - Federal ordinary business income (loss)**Part 1 - Income from federal Form 1065**

1	Gross receipts or sales	1	16004617
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	16004617
4	Cost of goods sold	4	14810342
5	Gross profit (subtract line 4 from line 3)	5	1194275
6	Ordinary income (loss) from other partnerships, estates, and trusts (submit statement)	6	
7	Net farm profit (loss) (submit federal Form 1040, Schedule F)	7	
8	Net gain (loss) from federal Form 4797, Part II, line 17 (submit federal Form 4797)	8	
9	Other income (loss) (submit statement)	9	1446096
10	Total income (loss) (combine lines 5 through 9)	10	2640371

Part 2 - Deductions from federal Form 1065

11	Salaries and wages (other than to partners) (less employment credits)	11	1188852
12	Guaranteed payments to partners	12	
13	Repairs and maintenance	13	
14	Bad debts	14	
15	Rent	15	299129
16	Taxes and licenses	16	44267
17	Interest	17	158145
18	Depreciation (if required, submit federal Form 4562)	18	
19	Depreciation reported on federal Form 1125-A and elsewhere on return	19	
20	Subtract line 19 from line 18	20	
21	Depletion (do not deduct oil and gas depletion)	21	
22	Retirement plans, etc	22	
23	Employee benefit programs	23	41835
24	Other deductions (submit statement)	24	804330
25	Total deductions (add lines 11 through 17 and lines 20 through 24)	25	2536558
26	Ordinary business income (loss) (subtract line 25 from line 10)	26	103813

Important: You **must** make an entry on line 26a.

26a	Recomputed ordinary business income (loss) (see instructions)	26a	103813
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Section 3 - Cost of goods sold (from federal Form 1125-A, see instructions)

27	Inventory at beginning of year	27	3377523
28	Purchases	28	16299918
29	Cost of labor	29	
30	Additional IRC section 263A costs (submit statement)	30	
31	Other costs (submit statement)	31	
32	Total (add lines 27 through 31)	32	19677441
33	Inventory at end of year	33	4867099
34	Cost of goods sold (subtract line 33 from line 32)	34	14810342

35 Methods used for valuing closing inventory (mark an X in applicable boxes)

☒ Cost

☒ Lower of cost or market

☐ Other (specify method used and explain) _____

36 Was there a writedown of *subnormal* goods? Yes ☐ No ☒

37a Was LIFO inventory method adopted this tax year for any goods? (If Yes, submit federal Form 970.) Yes ☐ No ☒

37b If the LIFO inventory method was used for this tax year, enter the amount of closing inventory computed under LIFO **37b** _____

38 Do the rules of IRC section 263A (for property produced or acquired for resale) apply to the partnership? Yes ☒ No ☐

39 Was there any change in determining quantities, cost, or valuations between opening and closing inventory? Yes ☐ No ☒

If Yes, explain _____

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Section 4 - Balance sheets per books (from federal Form 1065, Schedule L)

Assets		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
40 Cash	40		393049		410493
41 Trade notes and accounts receivable	41	72377		81248	
42 Less allowances for bad debts	42		72377		81248
43 Inventories	43		3377523		4867099
44 U.S. government obligations	44				
45 Tax-exempt securities	45				
46 Other current assets (submit statement) STMT 3	46		57109		66648
47a Loans to partners (or persons related to partners)	47a				
47b Mortgage and real estate loans	47b				
48 Other investments (submit statement)	48				
49 Buildings and other depreciable assets	49			5000	
50 Less accumulated depreciation	50			5000	
51 Depletable assets	51				
52 Less accumulated depletion	52				
53 Land (net any amortization)	53				
54 Intangible assets (amortizable only)	54				
55 Less accumulated amortization	55				
56 Other assets (submit statement)	56				
57 Total assets	57		3900058		5425488

Liabilities and capital		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
58 Accounts payable	58		141143		509963
59 Mortgages, notes, bonds payable in less than one year	59		3517534		4433999
60 Other current liabilities (submit statement)	60	STMT 4	223525		274534
61 All nonrecourse loans	61				
62a Loans from partners (or persons related to partners)	62a				
62b Mortgages, notes, bonds payable in one year or more	62b				
63 Other liabilities (submit statement) STMT 5	63		90250		80250
64 Partners' capital accounts	64		-72394		126742
65 Total liabilities and capital	65		3900058		5425488

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Section 5 - Reconciliation of income (loss) per books with income (loss) per return (From federal

Form 1065, Schedule M-1; see instructions. If Schedule M-3 was filed, mark an X in the box
file Schedule M-3 and any related documents with Form IT-204; skip Section 5 and
continue with Section 6.)

☐

66	Net income (loss) per books	66	309136
67	Income included on return not recorded on books this year, from Schedule M-1, line 2	67	
	Identify:		
68	Guaranteed payments (other than health insurance)	68	
69	Expenses recorded on books this year not included on return, from Schedule M-1, line 4	69	
	Identify:		
70	Add lines 66 through 69	70	309136
71	Income recorded on books this year not included on return, from Schedule M-1, line 6	71	210323
	Identify: SEE STATEMENT 6		
72	Deductions included on return not charged against book income this year, from Schedule M-1, line 7	72	
	Identify:		
73	Add lines 71 and 72	73	210323
74	Income (loss) (subtract line 73 from line 70)	74	98813

Section 6 - Analysis of partners' capital accounts (from federal Form 1065, Schedule M-2)

75	Balance at beginning of year	75	-72394
76	Capital contributed - cash	76	
77	Capital contributed - property	77	
78	Net income (loss) per books	78	309136
79	Other increases	79	
	Identify:		
80	Add lines 75 through 79	80	236742
81	Distributions - cash	81	110000
82	Distributions - property	82	
83	Other decreases	83	
	Identify:		
84	Add lines 81, 82, and 83	84	110000
85	Balance at end of year (subtract line 84 from line 80)	85	126742

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Section 7 - Partners' share of income, deductions, etc. (from federal Form 1065, Schedule K)

Partners' distributive share items

86	Ordinary business income (loss)	86	103813
87	Net rental real estate income (loss) (submit federal Form 8825)	87	
88a	Other gross rental income (loss)	88a	
88b	Expenses from other rental activities	88b	
89	Other net rental income (loss) (subtract line 88b from line 88a)	89	
90	Guaranteed payments	90	
91	Interest income	91	
92	Ordinary dividends	92	
93	Royalties	93	
94	Net short-term capital gain (loss) (submit federal Schedule D)	94	
95	Net long-term capital gain (loss) (submit federal Schedule D)	95	
96	Net section 1231 gain (loss) (submit federal Form 4797)	96	
97	Other income (loss) (see instructions)	97	
Identify:			
98	Section 179 deduction (submit federal Form 4562)	98	5000
99	Other deductions (see instructions)	99	
Identify:			
100	This line intentionally left blank	100	
101	Net earnings (loss) from self-employment	101	
102	Tax-exempt income and nondeductible expenses (see instructions)	102	210323
103	Distributions - cash and marketable securities	103	110000
104	Distributions - other property	104	
105	Other items not included above that are required to be reported separately to partners (see instr.)	105	17465427
Identify: SEE STATEMENT 7			

Analysis of net income (loss)

106	Enter the amount from line 1 of the Analysis of Net Income (Loss) section on federal Form 1065	106	98813
-----	--	-----	-------

Analysis by type of partner

	A Corporate	B Individual (active)	C Individual (passive)	D Partnership	E Exempt organization	F Nominee/other
General partners						
Limited partners		98813				

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Section 8 - New York modifications (see instructions)

107 This line intentionally left blank

108 Total addition modifications (from Form IT-225, line 9)

108

109 This line intentionally left blank

110 Total subtraction modifications (from Form IT-225, line 18)

110

111 Additions to itemized deductions

	Letter	Amount
111a		
111b		
111c		

	Letter	Amount
111d		
111e		
111f		

112 Total additions to itemized deductions (add lines 111a through 111f)

112

113 Subtractions from itemized deductions

	Letter	Amount
113a		
113b		
113c		

	Letter	Amount
113d		
113e		
113f		

114 Total subtractions from itemized deductions (add lines 113a through 113f)

114

115 This line intentionally left blank

115

Section 9 - Other information

116a New York source gross income (see instructions)

116a

17450713

116b MCTD allocation percentage (see instructions)

116b

100.0000 %

116c Total receipts from the sale of goods by manufacturing

116c

116d New York adjusted basis of qualified manufacturing property

116d

117a Did the partnership sell assets subject to IRC 1060?

Yes ☐No ☒

117b If the partnership filed a group return on behalf of any nonresident partners, enter the special

NYS identification number

117b

117c Is this partnership a partner in another partnership or LLC? (If Yes, list the names and EINs below;

submit additional sheets if necessary.)

Yes ☐No ☒

Name of entity	EIN

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Section 10 - New York allocation schedule

Part 1 - List all places, both in and outside of NYS, where the partnership carries on business (submit additional sheets if necessary)

Street address	City and state	Description (see instructions)

118 Do books and records reflect income earned in New York? (If Yes, do not complete Part 2.) Yes ☒ No ☐

Part 2 - Formula basis allocation of income if books and records do not reflect income earned in New York

Items used as factors	A - Totals - in and outside of NYS		B - New York State amounts		C - Percent col. B is of col. A	
	Dollars		Dollars			
Property percentage (see inst.)						
119 Real property owned	119		119			
120 Real property rented from others	120		120			
121 Tangible personal property owned	121		121			
121a Tangible personal property rented from others	121a		121a			
122 Property percentage (add lines 119 through 121a; see instruct.)	122		122		122	%
123 Payroll percentage (see instruct.)	123		123		123	%
124 Gross income percentage (see instr.)	124		124		124	%
125 Total of percentages (total column C, lines 122, 123, and 124)					125	%
126 Business allocation percentage (divide line 125 by three or by actual number of percentages if less than three)					126	%

Section 11 - Partners' credit information (see instructions)

Has the partnership (or an entity of which the partnership is an owner) been convicted of Bribery Involving Public Servants and Related Offenses, Corrupting the Government, or Defrauding the Government (NYS Penal Law Article 200 or 496, or section 195.20)? Yes ☐ No ☒

Part 1 - Flow-through credit bases and information

Brownfield redevelopment tax credit (Form IT-611, IT-611.1, and/or IT-611.2)

127 Site preparation credit component	127	
128 Tangible property credit component	128	
129 On-site groundwater remediation credit component	129	
130 This line intentionally left blank	130	
131 This line intentionally left blank	131	
132 This line intentionally left blank	132	

QEZE tax reduction credit (Form IT-604)

133 QEZE employment increase factor	133	
134 QEZE zone allocation factor	134	
135 QEZE benefit period factor	135	

Excelsior jobs program tax credit (Form IT-607)

136 Excelsior jobs tax credit component	136	
137 Excelsior investment tax credit component	137	
138 Excelsior research and development tax credit component	138	
139 Excelsior real property tax credit component	139	

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Part 1 - Flow-through credit bases and information (continued)**Farmers' school tax credit** (Form IT-217)

140	Acres of qualified agricultural property	140	
141	Acres of qualified conservation property	141	
142	Eligible school district property taxes paid	142	
143	Acres of qualified agricultural property converted to nonqualified use	143	

Other flow-through credit bases and information

Credit bases

Code	Amount	Code	Amount
144a		144d	
144b		144e	
144c		144f	

Credit information

Code	Information	Code	Information
144g		144j	
144h		144k	
144i		144l	

Part 2 - Flow-through credits, addbacks and recaptures

145	Long-term care insurance credit (Form IT-249)	145	
146a	Investment credit (including employment incentive credit and historic barn rehabilitation credit; Form IT-212)	146a	
146b	Research and development - investment credit (Form IT-212)	146b	
147	Other flow-through credits		

Code	Amount	Code	Amount
147a		147e	
147b		147f	
147c		147g	
147d		147h	

148 Addbacks of credits and recaptures

Code	Amount	Code	Amount
148a		148d	
148b		148e	
148c		148f	

Part 3 - START-UP NY tax elimination credit information (Form IT-638)

149	START-UP NY business certificate number (Form DTF-74)	149	
150	Year of START-UP NY business tax benefit period	150	
151	START-UP NY area allocation factor	151	

Section 12 - New York adjustments due to decoupling from the IRC (see instructions)

1	Total of New York additions	1	
2	Total of New York subtractions	2	

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NY IT-204	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
SERVICE CONTRACT INCOME		808,239.
FINANCE INCOME		582,663.
OTHER INCOME		55,193.
TOTAL TO FORM IT-204, PAGE 2, LINE 9		1,446,096.

NY IT-204	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
POLICY WORK		127,201.
UTILITIES		21,622.
TELEPHONE		20,956.
OFFICE SUPPLIES		28,448.
OUTSIDE SERVICES		<267,020.>
CREDIT CARD PROCESSING FEES		10,214.
PROFESSIONAL FEES		21,981.
MANAGEMENT FEES		308,387.
DATA PROCESSING		145,637.
MISCELLANEOUS EXPENSE		9,585.
EQUIPMENT RENTAL AND REPAIRS		1,861.
INSURANCE		30,035.
COMPANY VEHICLE EXPENSE		3,739.
SHOP SUPPLIES		2,046.
LLC FEE		3,000.
ADVERTISING		336,638.
TOTAL TO FORM IT-204, PAGE 2, LINE 24		804,330.

NY IT-204	OTHER CURRENT ASSETS	STATEMENT 3
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
FINANCE RESERVES RECEIVABLE	57,109.	66,648.
TOTAL TO FORM IT-204, PAGE 4, LINE 46	57,109.	66,648.

NY IT-204

OTHER CURRENT LIABILITIES

STATEMENT 4

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
SALES TAX PAYABLE	103,035.	130,306.
CUSTOMER DEPOSITS	93,522.	141,228.
ACCRUED EXPENSES	23,968.	0.
ACCRUED LLC FEE	3,000.	3,000.
TOTAL TO FORM IT-204, PAGE 4, LINE 60	223,525.	274,534.

NY IT-204

OTHER LIABILITIES

STATEMENT 5

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
OTHER LOANS PAYABLE	90,250.	80,250.
TOTAL TO FORM IT-204, PAGE 4, LINE 63	90,250.	80,250.

NY IT-204

INCOME RECORDED ON BOOKS NOT INCLUDED ON RETURN STATEMENT 6

DESCRIPTION	AMOUNT
EIDL GRANT PROCEEDS	10,000.
PPP LOAN PROCEEDS FORGIVEN	200,323.
TOTAL TO FORM IT-204, PAGE 5, LINE 71	210,323.

NY IT-204	ITEMS REPORTED SEPARATELY TO PARTNERS	STATEMENT 7
DESCRIPTION		AMOUNT
GROSS RECEIPTS FOR SECTION 448(C)		16,004,617.
SECTION 199A - ORDINARY INCOME (LOSS)		103,813.
SECTION 199A - SECTION 179 DEDUCTION		5,000.
SECTION 199A W-2 WAGES		1,188,852.
SECTION 199A UNADJUSTED BASIS OF ASSETS		5,000.
BUSINESS INTEREST EXPENSE		158,145.
TOTAL TO FORM IT-204, PAGE 6, LINE 105		17,465,427.



Department of Taxation and Finance
New York Partner's Schedule K-1
Tax Law - Article 22 (Personal Income Tax)

088851 11-20-20
IT-204-IP

For calendar year 2020 or tax year beginning [] and ending []

☐ Final K-1 1
☐ Amended K-1

Partners: Before completing your income tax return, see Form IT-204-IP-I, *Partner's Instructions for Form IT-204-IP* (available at www.tax.ny.gov).

Partnership's information (see instructions)

Partnership's name (as shown on Form IT-204) NORTHSHORE MOTOR LEASING LLC	Partnership's EIN *****1757
---	---------------------------------------

A Mark an **X** in the box if either applies to your entity ☐ Publicly traded partnership ☐ Portfolio investment partnership

B Tax shelter registration number, if any **B** []

C Business allocation percentage **C** [] %

Partner's information (see instructions)

Partner's name DAVID BARON			Partner's identifying number *****
Partner's address 6 OLD WAGON LANE			
City OLD WESTBURY	State NY	ZIP code 11568	

D The partner is a (mark an **X** in the appropriate box) ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member

E What is the tax filing status of the partner? (Mark an **X** in the appropriate box, if known.) ☒ Individual ☐ Estate/trust ☐ Partnership

F If the partner is a disregarded entity or grantor trust, enter the tax ID of the entity or individual reporting the income, if known **F** []

G Did the partner sell its entire interest during the tax year? **G** Yes ☐ No ☒

H Partner's share of profit, loss, and capital

	Beginning	Ending
1) Profit H1	33.3333%	33.3333%
2) Loss H2	33.3333%	33.3333%
3) Capital H3	33.3333%	33.3333%

I Partner's share of liabilities at the end of the year

1) Nonrecourse	I1	
2) Qualified nonrecourse financing	I2	
3) Recourse	I3	1478000

J Partner's capital account analysis

1) Beginning capital account	J1	-23361
2) Capital contributed during the year - cash	J2	
3) Capital contributed during the year - property	J3	
4) Current year increase (decrease)	J4	103044
5) Withdrawals and distributions - cash	J5	40000
6) Withdrawals and distributions - property	J6	
7) Ending capital account	J7	39683

Method of accounting (mark an **X** in the appropriate box)
☒ Tax basis ☐ GAAP ☐ Book ☐ Other (submit explanation)

K Resident status (mark an **X** in all boxes that apply; see instructions)

<input checked="" type="checkbox"/> NYS full-year resident	<input type="checkbox"/> Yonkers full-year resident	<input type="checkbox"/> NYC full-year resident
<input type="checkbox"/> NYS part-year resident	<input type="checkbox"/> Yonkers part-year resident	<input type="checkbox"/> NYC part-year resident
<input type="checkbox"/> NYS nonresident	<input type="checkbox"/> Yonkers nonresident	

L If the partner was included in a group return, enter the special NYS identification number, if known **L** []

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088852 11-20-20

M Was Form IT-2658-E filed with the partnership? M Yes ☐ No ☐

N NYS estimated tax paid on behalf of partner (from Form IT-2658-NYS)

	Date	Amount
1) First installment	N1	
2) Second installment	N2	
3) Third installment	N3	
4) Fourth installment	N4	
Total NYS estimated tax paid on behalf of partner (add lines N1 through N4)	N	

O Estimated MCTMT paid on behalf of partner (from Form IT-2658-MTA)

	Date	Amount
1) First installment	O1	
2) Second installment	O2	
3) Third installment	O3	
4) Fourth installment	O4	
Total estimated MCTMT paid on behalf of partner (add lines O1 through O4)	O	

P Was the partnership required to report any nonqualified deferred compensation, as required by IRC § 457A, on its 2020 federal return? (see instructions) P Yes ☐ No ☒

Partner's share of income, deductions, etc.

A - Partner's distributive share items		B - Federal K-1 amount	C - New York State amount
1 Ordinary business income (loss)	1	34604	1 34604
2 Net rental real estate income (loss)	2		2
3 Other net rental income (loss)	3		3
4 Guaranteed payments	4		4
5 Interest income	5		5
6 Ordinary dividends	6		6
7 Royalties	7		7
8 Net short-term capital gain (loss)	8		8
9 Net long-term capital gain (loss)	9		9
10 Net section 1231 gain (loss)	10		10
11 Other income (loss) Identify:	11		11
12 Section 179 deduction	12	1667	12 1667
13 Other deductions Identify:	13		13
14 This line intentionally left blank	14		14
15 Net earnings (loss) from self-employment	15		15
16 Tax-exempt income and nondeductible expenses	16	70107	16 70107
17 Distributions - cash and marketable securities	17	40000	17 40000
18 Distributions - other property	18		18
19 Other items not included above that are required to be reported separately to partners Identify: SEE STATEMENT	19	5821805	19 5821805

Partner's share of New York modifications (see instructions)

20 New York State additions		A - Total amount	B - New York State allocated amount
Number			
20a	EA-		
20b	EA-		
20c	EA-		
20d	EA-		
20e	EA-		
20f	EA-		

21 Total addition modifications (total of column A, lines 20a through 20f) 21

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IT-204-IP (2020)

Page 3 of 5

Partner's share of New York modifications (continued)

22 New York State subtractions

	Number	A - Total amount	B - New York State allocated amount
22a	ES-		
22b	ES-		
22c	ES-		
22d	ES-		
22e	ES-		
22f	ES-		

23 Total subtraction modifications (total of column A, lines 22a through 22f) **23**

24 Additions to itemized deductions

	Letter	Amount
24a		
24b		
24c		
24d		
24e		
24f		

25 Total additions to itemized deductions (add lines 24a through 24f) **25**

26 Subtractions from itemized deductions

	Letter	Amount
26a		
26b		
26c		
26d		
26e		
26f		

27 Total subtractions from itemized deductions (add lines 26a through 26f) **27**

28 This line intentionally left blank **28**

Partner's other information

29a Partner's share of New York source gross income	29a <input type="text" value="5816904"/>
29b MCTD allocation percentage (see instructions)	29b <input type="text" value=""/>
29c Partner's share of receipts from the sale of goods by manufacturing	29c <input type="text" value=""/>
29d Partner's share of New York adjusted basis of qualified manufacturing property	29d <input type="text" value=""/>

Partner's credit information

Part 1 - Flow-through credit bases and information

Brownfield redevelopment tax credit (Form IT-611, IT-611.1, or IT-611.2)

		A - Form IT-611	B - Form IT-611.1	C - Form IT-611.2
30 Site preparation credit component	30			
31 Tangible property credit component	31			
32 On-site groundwater remediation credit component	32			

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Partner's credit information (continued)

33 This line intentionally left blank

34 This line intentionally left blank

35 This line intentionally left blank

33	
34	
35	

QEZE tax reduction credit (Form IT-604)

36 QEZE employment increase factor

37 QEZE zone allocation factor

38 QEZE benefit period factor

36	
37	
38	

Excelsior jobs program tax credit (Form IT-607)

39 Excelsior jobs tax credit component

40 Excelsior investment tax credit component

41 Excelsior research and development tax credit component

42 Excelsior real property tax credit component

39	
40	
41	
42	

Farmers' school tax credit (Form IT-217)

43 Acres of qualified agricultural property

44 Acres of qualified conservation property

45 Eligible school district property taxes paid

46 Acres of qualified agricultural property converted to nonqualified use

43	
44	
45	
46	

Other flow-through credit bases and information

Credit bases

Code	Amount	Code	Amount
47a		47d	
47b		47e	
47c		47f	

Credit information

Code	Information	Code	Information
47g		47j	
47h		47k	
47i		47l	

Part 2 - Flow-through credits, addbacks, and recaptures

48 Long-term care insurance credit (Form IT-249)

49 Investment credit (including employment incentive credit and historic barn rehabilitation credit; Form IT-212)

50 Research and development - investment credit (Form IT-212)

51 Other flow-through credits

48	
49	
50	

Code	Amount	Code	Amount
51a		51e	
51b		51f	
51c		51g	
51d		51h	

52 Addbacks of credits and recaptures

Code	Amount	Code	Amount
52a		52d	
52b		52e	
52c		52f	

NO HANDWRITTEN ENTRIES ON THIS FORM

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Partner's credit information *(continued)*

Part 3 - START-UP NY tax elimination credit information *(Form IT-638)*

53	START-UP NY business certificate number <i>(Form DTF-74)</i>	53	
54	Year of START-UP NY business tax benefit period	54	
55	START-UP NY area allocation factor	55	

Partner's share of New York adjustments due to decoupling from the IRC *(see instructions)*

		A - Total amount	B - New York State allocated amount
1	Total of New York additions	1	
2	Total of New York subtractions	2	

NO HANDWRITTEN ENTRIES ON THIS FORM



NY IT-204-IP OTHER ITEMS REQUIRED TO BE REPORTED SEPARATELY

DESCRIPTION	AMOUNT FROM FEDERAL SCHEDULE K-1	NEW YORK STATE AMOUNT
BUSINESS INTEREST EXPENSE	52,715.	52,715.
GROSS RECEIPTS FOR SECTION 448(C)	5,334,872.	5,334,872.
SECTION 199A W-2 WAGES	396,280.	396,280.
SECTION 199A UNADJUSTED BASIS OF ASSETS	1,667.	1,667.
SECTION 199A ORDINARY INCOME/LOSS	34,604.	34,604.
SECTION 199A SECTION 179	1,667.	1,667.
TOTAL TO FORM IT-204-IP, PAGE 2, LINE 19	5,821,805.	5,821,805.



Department of Taxation and Finance
New York Partner's Schedule K-1
Tax Law - Article 22 (Personal Income Tax)

088851 11-20-20
IT-204-IP

For calendar year 2020 or tax year beginning [] and ending []

☐ Final K-1 2
☐ Amended K-1

Partners: Before completing your income tax return, see Form IT-204-IP-I, *Partner's Instructions for Form IT-204-IP* (available at www.tax.ny.gov).

Partnership's information (see instructions)

Partnership's name (as shown on Form IT-204) NORTHSHORE MOTOR LEASING LLC	Partnership's EIN *****1757
---	---------------------------------------

A Mark an **X** in the box if either applies to your entity ☐ Publicly traded partnership ☐ Portfolio investment partnership

B Tax shelter registration number, if any **B** []

C Business allocation percentage **C** [] %

Partner's information (see instructions)

Partner's name ASAD KHAN			Partner's identifying number *****
Partner's address 16 ACORN PONDS DR			
City ROSLYN	State NY	ZIP code 11576	

D The partner is a (mark an **X** in the appropriate box) ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member

E What is the tax filing status of the partner? (Mark an **X** in the appropriate box, if known.) ☒ Individual ☐ Estate/trust ☐ Partnership

F If the partner is a disregarded entity or grantor trust, enter the tax ID of the entity or individual reporting the income, if known **F** []

G Did the partner sell its entire interest during the tax year? **G** Yes ☐ No ☒

H Partner's share of profit, loss, and capital

	Beginning	Ending
1) Profit H1	33.3333%	33.3333%
2) Loss H2	33.3333%	33.3333%
3) Capital H3	33.3333%	33.3333%

I Partner's share of liabilities at the end of the year

1) Nonrecourse	I1	[]
2) Qualified nonrecourse financing	I2	[]
3) Recourse	I3	1477999

J Partner's capital account analysis

1) Beginning capital account	J1	-23292
2) Capital contributed during the year - cash	J2	[]
3) Capital contributed during the year - property	J3	[]
4) Current year increase (decrease)	J4	103048
5) Withdrawals and distributions - cash	J5	35000
6) Withdrawals and distributions - property	J6	[]
7) Ending capital account	J7	44756

Method of accounting (mark an **X** in the appropriate box)
☒ Tax basis ☐ GAAP ☐ Book ☐ Other (submit explanation)

K Resident status (mark an **X** in all boxes that apply; see instructions)

<input checked="" type="checkbox"/> NYS full-year resident	<input type="checkbox"/> Yonkers full-year resident	<input type="checkbox"/> NYC full-year resident
<input type="checkbox"/> NYS part-year resident	<input type="checkbox"/> Yonkers part-year resident	<input type="checkbox"/> NYC part-year resident
<input type="checkbox"/> NYS nonresident	<input type="checkbox"/> Yonkers nonresident	

L If the partner was included in a group return, enter the special NYS identification number, if known **L** []

NO HANDWRITTEN ENTRIES ON THIS FORM

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Page 2 of 5 IT-204-IP (2020)

088852 11-20-20

M Was Form IT-2658-E filed with the partnership? M Yes ☐ No ☐

N NYS estimated tax paid on behalf of partner (from Form IT-2658-NYS)

	Date	Amount
1) First installment	N1	
2) Second installment	N2	
3) Third installment	N3	
4) Fourth installment	N4	
Total NYS estimated tax paid on behalf of partner (add lines N1 through N4)	N	

O Estimated MCTMT paid on behalf of partner (from Form IT-2658-MTA)

	Date	Amount
1) First installment	O1	
2) Second installment	O2	
3) Third installment	O3	
4) Fourth installment	O4	
Total estimated MCTMT paid on behalf of partner (add lines O1 through O4)	O	

P Was the partnership required to report any nonqualified deferred compensation, as required by IRC § 457A, on its 2020 federal return? (see instructions) P Yes ☐ No ☒

Partner's share of income, deductions, etc.

A - Partner's distributive share items		B - Federal K-1 amount	C - New York State amount
1 Ordinary business income (loss)	1	34605	1 34605
2 Net rental real estate income (loss)	2		2
3 Other net rental income (loss)	3		3
4 Guaranteed payments	4		4
5 Interest income	5		5
6 Ordinary dividends	6		6
7 Royalties	7		7
8 Net short-term capital gain (loss)	8		8
9 Net long-term capital gain (loss)	9		9
10 Net section 1231 gain (loss)	10		10
11 Other income (loss) Identify:	11		11
12 Section 179 deduction	12	1666	12 1666
13 Other deductions Identify:	13		13
14 This line intentionally left blank	14		14
15 Net earnings (loss) from self-employment	15		15
16 Tax-exempt income and nondeductible expenses	16	70109	16 70109
17 Distributions - cash and marketable securities	17	35000	17 35000
18 Distributions - other property	18		18
19 Other items not included above that are required to be reported separately to partners Identify: SEE STATEMENT	19	5821817	19 5821817

Partner's share of New York modifications (see instructions)

20 New York State additions		A - Total amount	B - New York State allocated amount
Number			
20a	EA-		
20b	EA-		
20c	EA-		
20d	EA-		
20e	EA-		
20f	EA-		

21 Total addition modifications (total of column A, lines 20a through 20f) 21

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NO HANDWRITTEN ENTRIES ON THIS FORM

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IT-204-IP (2020)

Page 3 of 5

Partner's share of New York modifications (continued)

22 New York State subtractions

	Number	A - Total amount	B - New York State allocated amount
22a	ES-		
22b	ES-		
22c	ES-		
22d	ES-		
22e	ES-		
22f	ES-		

23 Total subtraction modifications (total of column A, lines 22a through 22f) **23**

24 Additions to itemized deductions

	Letter	Amount
24a		
24b		
24c		
24d		
24e		
24f		

25 Total additions to itemized deductions (add lines 24a through 24f) **25**

26 Subtractions from itemized deductions

	Letter	Amount
26a		
26b		
26c		
26d		
26e		
26f		

27 Total subtractions from itemized deductions (add lines 26a through 26f) **27**

28 This line intentionally left blank **28**

Partner's other information

29a Partner's share of New York source gross income	29a <input type="text" value="5816904"/>
29b MCTD allocation percentage (see instructions)	29b <input type="text" value=""/>
29c Partner's share of receipts from the sale of goods by manufacturing	29c <input type="text" value=""/>
29d Partner's share of New York adjusted basis of qualified manufacturing property	29d <input type="text" value=""/>

Partner's credit information

Part 1 - Flow-through credit bases and information

Brownfield redevelopment tax credit (Form IT-611, IT-611.1, or IT-611.2)

		A - Form IT-611	B - Form IT-611.1	C - Form IT-611.2
30 Site preparation credit component	30			
31 Tangible property credit component	31			
32 On-site groundwater remediation credit component	32			

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NO HANDWRITTEN ENTRIES ON THIS FORM

Partner's credit information (continued)

33 This line intentionally left blank

34 This line intentionally left blank

35 This line intentionally left blank

33	
34	
35	

QEZE tax reduction credit (Form IT-604)

36 QEZE employment increase factor

37 QEZE zone allocation factor

38 QEZE benefit period factor

36	
37	
38	

Excelsior jobs program tax credit (Form IT-607)

39 Excelsior jobs tax credit component

40 Excelsior investment tax credit component

41 Excelsior research and development tax credit component

42 Excelsior real property tax credit component

39	
40	
41	
42	

Farmers' school tax credit (Form IT-217)

43 Acres of qualified agricultural property

44 Acres of qualified conservation property

45 Eligible school district property taxes paid

46 Acres of qualified agricultural property converted to nonqualified use

43	
44	
45	
46	

Other flow-through credit bases and information

Credit bases

Code	Amount	Code	Amount
47a		47d	
47b		47e	
47c		47f	

Credit information

Code	Information	Code	Information
47g		47j	
47h		47k	
47i		47l	

Part 2 - Flow-through credits, addbacks, and recaptures

48 Long-term care insurance credit (Form IT-249)

49 Investment credit (including employment incentive credit and historic barn rehabilitation credit; Form IT-212)

50 Research and development - investment credit (Form IT-212)

51 Other flow-through credits

48	
49	
50	

Code	Amount	Code	Amount
51a		51e	
51b		51f	
51c		51g	
51d		51h	

52 Addbacks of credits and recaptures

Code	Amount	Code	Amount
52a		52d	
52b		52e	
52c		52f	

NO HANDWRITTEN ENTRIES ON THIS FORM

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Partner's credit information *(continued)*

Part 3 - START-UP NY tax elimination credit information *(Form IT-638)*

53	START-UP NY business certificate number <i>(Form DTF-74)</i>	53	
54	Year of START-UP NY business tax benefit period	54	
55	START-UP NY area allocation factor	55	

Partner's share of New York adjustments due to decoupling from the IRC *(see instructions)*

	A - Total amount	B - New York State allocated amount
1 Total of New York additions	1	
2 Total of New York subtractions	2	

NO HANDWRITTEN ENTRIES ON THIS FORM



NY IT-204-IP OTHER ITEMS REQUIRED TO BE REPORTED SEPARATELY

DESCRIPTION	AMOUNT FROM FEDERAL SCHEDULE K-1	NEW YORK STATE AMOUNT
BUSINESS INTEREST EXPENSE	52,715.	52,715.
GROSS RECEIPTS FOR SECTION 448(C)	5,334,873.	5,334,873.
SECTION 199A W-2 WAGES	396,292.	396,292.
SECTION 199A UNADJUSTED BASIS OF ASSETS	1,666.	1,666.
SECTION 199A ORDINARY INCOME/LOSS	34,605.	34,605.
SECTION 199A SECTION 179	1,666.	1,666.
TOTAL TO FORM IT-204-IP, PAGE 2, LINE 19	5,821,817.	5,821,817.



Department of Taxation and Finance
New York Partner's Schedule K-1
Tax Law - Article 22 (Personal Income Tax)

088851 11-20-20

IT-204-IP

For calendar year 2020 or tax year beginning [] and ending []

☐ Final K-1 3

☐ Amended K-1

Partners: Before completing your income tax return, see Form IT-204-IP-I, *Partner's Instructions for Form IT-204-IP* (available at www.tax.ny.gov).

Partnership's information (see instructions)

Partnership's name (as shown on Form IT-204) NORTHSHORE MOTOR LEASING LLC	Partnership's EIN *****1757
---	---------------------------------------

A Mark an **X** in the box if either applies to your entity ☐ Publicly traded partnership ☐ Portfolio investment partnership

B Tax shelter registration number, if any **B** []

C Business allocation percentage **C** [] %

Partner's information (see instructions)

Partner's name BRIAN CHABRIER			Partner's identifying number *****
Partner's address 4 CREEK RIDGE RD			
City BAYVILLE	State NY	ZIP code 11709	

D The partner is a (mark an **X** in the appropriate box) ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member

E What is the tax filing status of the partner? (Mark an **X** in the appropriate box, if known.) ☒ Individual ☐ Estate/trust ☐ Partnership

F If the partner is a disregarded entity or grantor trust, enter the tax ID of the entity or individual reporting the income, if known **F** []

G Did the partner sell its entire interest during the tax year? **G** Yes ☐ No ☒

H Partner's share of profit, loss, and capital

	Beginning	Ending
1) Profit H1	33.3333%	33.3333%
2) Loss H2	33.3333%	33.3333%
3) Capital H3	33.3333%	33.3333%

I Partner's share of liabilities at the end of the year

1) Nonrecourse	I1	
2) Qualified nonrecourse financing	I2	
3) Recourse	I3	1478000

J Partner's capital account analysis

1) Beginning capital account	J1	-25741
2) Capital contributed during the year - cash	J2	
3) Capital contributed during the year - property	J3	
4) Current year increase (decrease)	J4	103044
5) Withdrawals and distributions - cash	J5	35000
6) Withdrawals and distributions - property	J6	
7) Ending capital account	J7	42303

☒ Tax basis ☐ GAAP ☐ Book ☐ Other (submit explanation)

K Resident status (mark an **X** in all boxes that apply; see instructions)

<input checked="" type="checkbox"/> NYS full-year resident	<input type="checkbox"/> Yonkers full-year resident	<input type="checkbox"/> NYC full-year resident
<input type="checkbox"/> NYS part-year resident	<input type="checkbox"/> Yonkers part-year resident	<input type="checkbox"/> NYC part-year resident
<input type="checkbox"/> NYS nonresident	<input type="checkbox"/> Yonkers nonresident	

L If the partner was included in a group return, enter the special NYS identification number, if known **L** []

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NO HANDWRITTEN ENTRIES ON THIS FORM

Page 2 of 5 IT-204-IP (2020)

088852 11-20-20

M Was Form IT-2658-E filed with the partnership? M Yes ☐ No ☐

N NYS estimated tax paid on behalf of partner (from Form IT-2658-NYS)

	Date	Amount
1) First installment	N1	
2) Second installment	N2	
3) Third installment	N3	
4) Fourth installment	N4	
Total NYS estimated tax paid on behalf of partner (add lines N1 through N4)	N	

O Estimated MCTMT paid on behalf of partner (from Form IT-2658-MTA)

	Date	Amount
1) First installment	O1	
2) Second installment	O2	
3) Third installment	O3	
4) Fourth installment	O4	
Total estimated MCTMT paid on behalf of partner (add lines O1 through O4)	O	

P Was the partnership required to report any nonqualified deferred compensation, as required by IRC § 457A, on its 2020 federal return? (see instructions) P Yes ☐ No ☒

Partner's share of income, deductions, etc.

A - Partner's distributive share items		B - Federal K-1 amount	C - New York State amount
1 Ordinary business income (loss)	1	34604	1 34604
2 Net rental real estate income (loss)	2		2
3 Other net rental income (loss)	3		3
4 Guaranteed payments	4		4
5 Interest income	5		5
6 Ordinary dividends	6		6
7 Royalties	7		7
8 Net short-term capital gain (loss)	8		8
9 Net long-term capital gain (loss)	9		9
10 Net section 1231 gain (loss)	10		10
11 Other income (loss) Identify:	11		11
12 Section 179 deduction	12	1667	12 1667
13 Other deductions Identify:	13		13
14 This line intentionally left blank	14		14
15 Net earnings (loss) from self-employment	15		15
16 Tax-exempt income and nondeductible expenses	16	70107	16 70107
17 Distributions - cash and marketable securities	17	35000	17 35000
18 Distributions - other property	18		18
19 Other items not included above that are required to be reported separately to partners Identify: SEE STATEMENT	19	5821805	19 5821805

Partner's share of New York modifications (see instructions)

20 New York State additions		A - Total amount	B - New York State allocated amount
Number			
20a	EA-		
20b	EA-		
20c	EA-		
20d	EA-		
20e	EA-		
20f	EA-		

21 Total addition modifications (total of column A, lines 20a through 20f) 21

118002201019



NO HANDWRITTEN ENTRIES ON THIS FORM

Partner's share of New York modifications *(continued)*

22 New York State subtractions

	Number	A - Total amount	B - New York State allocated amount
22a	ES-		
22b	ES-		
22c	ES-		
22d	ES-		
22e	ES-		
22f	ES-		

23 Total subtraction modifications *(total of column A, lines 22a through 22f)* **23**

24 Additions to itemized deductions

	Letter	Amount
24a		
24b		
24c		
24d		
24e		
24f		

25 Total additions to itemized deductions *(add lines 24a through 24f)* **25**

26 Subtractions from itemized deductions

	Letter	Amount
26a		
26b		
26c		
26d		
26e		
26f		

27 Total subtractions from itemized deductions *(add lines 26a through 26f)* **27**

28 This line intentionally left blank **28**

Partner's other information

29a Partner's share of New York source gross income	29a <input type="text" value="5816904"/>
29b MCTD allocation percentage <i>(see instructions)</i>	29b <input type="text" value=""/>
29c Partner's share of receipts from the sale of goods by manufacturing	29c <input type="text"/>
29d Partner's share of New York adjusted basis of qualified manufacturing property	29d <input type="text"/>

Partner's credit information

Part 1 - Flow-through credit bases and information

Brownfield redevelopment tax credit *(Form IT-611, IT-611.1, or IT-611.2)*

		A - Form IT-611	B - Form IT-611.1	C - Form IT-611.2
30 Site preparation credit component	30			
31 Tangible property credit component	31			
32 On-site groundwater remediation credit component	32			

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NO HANDWRITTEN ENTRIES ON THIS FORM

Partner's credit information (continued)

33 This line intentionally left blank

34 This line intentionally left blank

35 This line intentionally left blank

33	
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QEZE tax reduction credit (Form IT-604)

36 QEZE employment increase factor

37 QEZE zone allocation factor

38 QEZE benefit period factor

36	
37	
38	

Excelsior jobs program tax credit (Form IT-607)

39 Excelsior jobs tax credit component

40 Excelsior investment tax credit component

41 Excelsior research and development tax credit component

42 Excelsior real property tax credit component

39	
40	
41	
42	

Farmers' school tax credit (Form IT-217)

43 Acres of qualified agricultural property

44 Acres of qualified conservation property

45 Eligible school district property taxes paid

46 Acres of qualified agricultural property converted to nonqualified use

43	
44	
45	
46	

Other flow-through credit bases and information

Credit bases

Code	Amount	Code	Amount
47a		47d	
47b		47e	
47c		47f	

Credit information

Code	Information	Code	Information
47g		47j	
47h		47k	
47i		47l	

Part 2 - Flow-through credits, addbacks, and recaptures

48 Long-term care insurance credit (Form IT-249)

49 Investment credit (including employment incentive credit and historic barn rehabilitation credit; Form IT-212)

50 Research and development - investment credit (Form IT-212)

51 Other flow-through credits

48	
49	
50	

Code	Amount	Code	Amount
51a		51e	
51b		51f	
51c		51g	
51d		51h	

52 Addbacks of credits and recaptures

Code	Amount	Code	Amount
52a		52d	
52b		52e	
52c		52f	

NO HANDWRITTEN ENTRIES ON THIS FORM

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Partner's credit information *(continued)*

Part 3 - START-UP NY tax elimination credit information *(Form IT-638)*

53	START-UP NY business certificate number <i>(Form DTF-74)</i>	53	
54	Year of START-UP NY business tax benefit period	54	
55	START-UP NY area allocation factor	55	

Partner's share of New York adjustments due to decoupling from the IRC *(see instructions)*

	A - Total amount	B - New York State allocated amount
1 Total of New York additions	1	
2 Total of New York subtractions	2	

NO HANDWRITTEN ENTRIES ON THIS FORM

118005201019



NY IT-204-IP OTHER ITEMS REQUIRED TO BE REPORTED SEPARATELY

DESCRIPTION	AMOUNT FROM FEDERAL SCHEDULE K-1	NEW YORK STATE AMOUNT
BUSINESS INTEREST EXPENSE	52,715.	52,715.
GROSS RECEIPTS FOR SECTION 448(C)	5,334,872.	5,334,872.
SECTION 199A W-2 WAGES	396,280.	396,280.
SECTION 199A UNADJUSTED BASIS OF ASSETS	1,667.	1,667.
SECTION 199A ORDINARY INCOME/LOSS	34,604.	34,604.
SECTION 199A SECTION 179	1,667.	1,667.
TOTAL TO FORM IT-204-IP, PAGE 2, LINE 19	5,821,805.	5,821,805.